

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 443 OF 12375

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Progressive Turnout Project

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Huggins Jones, Dawn, , ,

Mailing Address 1716 Lower Church Ct

City
Virginia BeachState
VAZip Code
23455-7016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2021

Transaction ID : VR05R11TQGB0

Amount of Each Receipt this Period

10.00

☐ Memo Item

* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Actblue

Mailing Address 366 Summer St

City
SomervilleState
MAZip Code
02144-3132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001561.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2021

Transaction ID : VR05R11TQGB0E

Amount of Each Receipt this Period

10.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arenas, Andragale, , ,

Mailing Address 155 Marine St
Unit 302City
Saint AugustineState
FLZip Code
32084-5185FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
noneOccupation (for Individual)
none

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

439.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 04 / 2021

Transaction ID : VR05R11TR8B0

Amount of Each Receipt this Period

5.00

☐ Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional)..... ▶

15.00

TOTAL This Period (last page this line number only)..... ▶